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PTO/SB/92 (09-04)

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AND  
CHANGE OF CORRESPONDENCE ADDRESS**

Application Number	09/875,361
Filing Date	06-05-2001
First Named Inventor	Su-Chen Chang
Art Unit	1634
Examiner Name	CHAKRABARTI, ARUN K.
Attorney Docket Number	20503-2000X-00

I hereby revoke all previous powers of attorney given in the above-identified application.

☒ A Power of Attorney is submitted herewith.

OR

☐ I hereby appoint the practitioners associated with the Customer Number:

☐ Please change the correspondence address for the above-identified application to:

☒ The address associated with Customer Number:

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OR

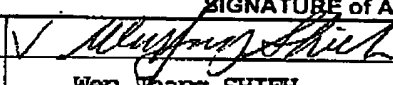
<input type="checkbox"/> Firm or Individual Name	Leong C. LEE		
Address	PMB#1008, 1867 Ygnacio Valley Rd.		
City	Walnut Creek	State	CA Zip 94598
Country	U.S.A.		
Telephone	905 812 9381	Fax	905 286 9781

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

**SIGNATURE of Applicant or Assignee of Record**

Signature			
Name	Wen-Chang SHIEH		
Date	01-25-2007	Telephone	

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ \*Total of \_\_\_\_\_ forms are submitted.

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<input type="checkbox"/> Firm or Individual Name	Leong C. LEI				
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City	Walnut Creek	State	CA	Zip	94598
Country	U.S.A.				
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Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

**SIGNATURE of Applicant or Assignee of Record**

Signature	YU CHEN		
Name	YU, Chen		
Date	2006.10.31	Telephone	

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